

# STDs in the South

## Public Health Impact

The southern region of the United States consists of the District of Columbia and 16 states: Alabama, Arkansas, Delaware, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia. This region has consistently had higher reported rates of chlamydia, gonorrhea and primary and secondary (P&S) syphilis than the other regions of the country (Northeast, Midwest, and West). The reasons for these higher rates in the South are not well understood, but may include differences in the racial and ethnic distribution of the population, poverty, and availability and quality of health care services. Regional differences in STD rates are particularly disturbing in light of the fact that STDs can increase the risk of HIV transmission. The high HIV prevalence among childbearing women living in the South is consistent with the high rates of these other STDs in the region.<sup>1</sup>

## Observations

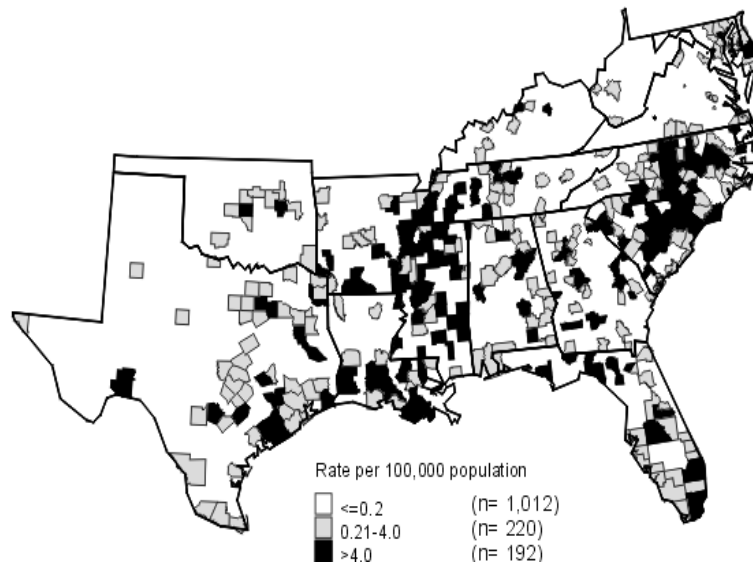
- The South has consistently had higher rates of gonorrhea and P&S syphilis compared with other regions throughout the 1980s and 1990s (Figures 11 and 24, Tables 13 and 25). From 1996 through 2000, the South also had a higher reported rate of chlamydia than the other regions of the country (Figure 4, Table 4).
- In 2000, six of the 10 states with the highest chlamydia rates were in the South (Figure 3, Table 3). Similarly, nine of the 10 states with the highest rates of gonorrhea were located in the South (Figure 10, Table 12). Fifteen of the southern states had 2000 reported rates of P&S syphilis that were greater than the Healthy People Year 2010 (HP2010) objective of 0.2 case per 100,000 persons (Figure 22, Table 23). All of these southern states had reported P&S syphilis rates in 2000 that were at least six times greater than the HP2010 objective (Figure 22, Table 23).
- In 2000, 412 (69.2%) of 595 counties with P&S syphilis rates above the HP2010 objective were located in the South (Figures 23 and KK).
- Of the 412 counties in the South that had reported P&S syphilis rates in 2000 above the HP2010 objective, 226 (55.9%) had an increase in the rate from 1999 to 2000 (Figures KK and LL).
- County-specific rates of chlamydia and gonorrhea in 2000 were calculated for those southern states submitting county level data (Figures MM and NN). These county level data were reported through the National Electronic Telecommunications System for Surveillance (NETSS), and are provisional for all states shown except Alabama, Arkansas, Delaware, Florida, Kentucky, Mississippi, Oklahoma, South Carolina, Texas, and Virginia where hardcopy

reports have been discontinued based on consistent, high quality, and timely submissions of NETSS data (Figures A1 and A2 in **Appendix**).

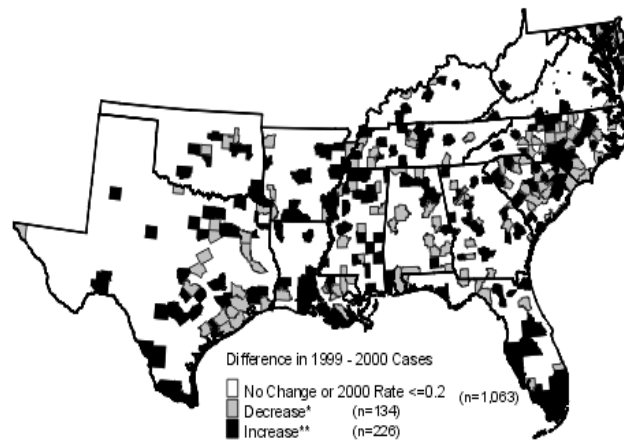
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<sup>1</sup>Koumans EH, Sternberg M, Gwinn M, Swint E, Zaidi A, St. Louis M. Geographic variation of HIV infection in childbearing women with syphilis in the United States. *AIDS* 2000;14:279-87.

**Figure KK. South — Primary and secondary syphilis case rates by county, 2000**



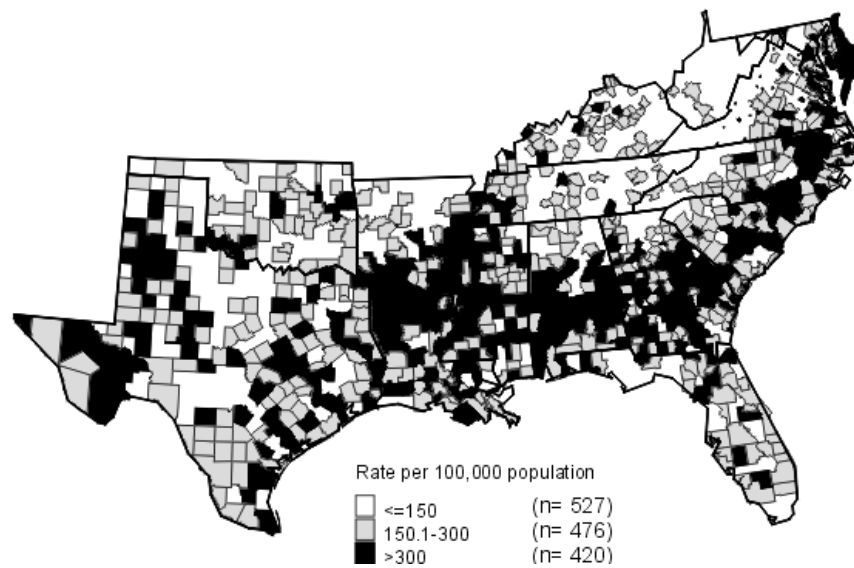
**Figure LL. South — Increases and decreases in cases of primary and secondary syphilis in 2000 compared with 1999 cases, by county**



\*Decrease in cases in 2000 vs. 1999; 2000 rate >0.2/100,000 population.

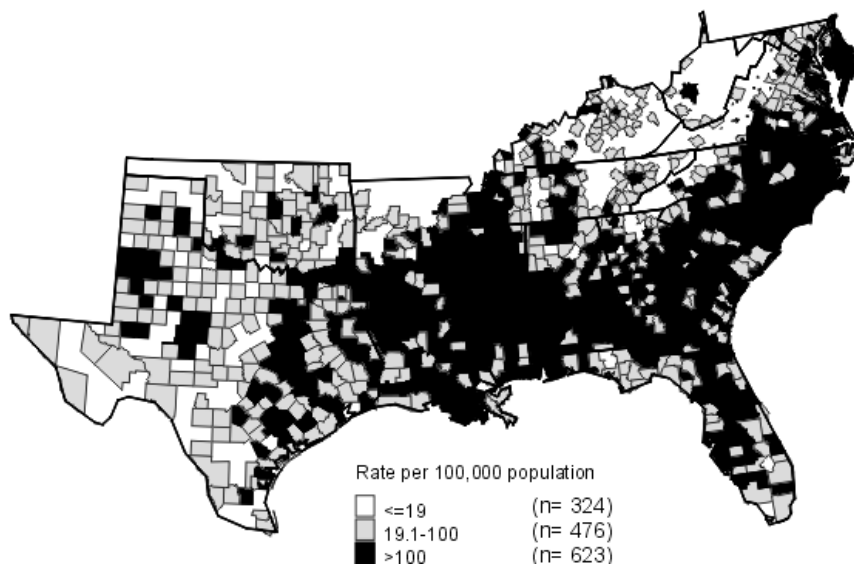
\*\*Increase in cases in 2000 vs. 1999; 2000 rate >0.2/100,000 population.

**Figure MM. South — Chlamydia case rates by county, 2000**



SOURCE: National Electronic Telecommunications System for Surveillance (NETSS) data

**Figure NN. South — Gonorrhea case rates by county, 2000**



SOURCE: National Electronic Telecommunications System for Surveillance (NETSS) data